

78
929-00
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POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>11/24/00</i>
O.I.P.F. CLASSIFIER	<i>[Signature]</i>	<i>2C 816</i>	<i>09-26-00</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>809</i>	<i>12-12-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final Original	
1	3/5/02
2	12/18/02
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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